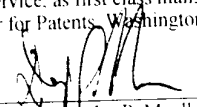


## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: KINGSMAN et al. Examiner: Unknown  
Serial No.: 09/117,071 Group Art Unit: Unknown  
Filed: Intl Filing Date January 23, 1997 Docket: 9192.5USWO  
Notice of Allow. Date: Na Batch No.: Na  
Due Date: September 21, 1998  
Title: RETROVIRAL VECTOR AND ITS USE IN GENE THERAPY

CERTIFICATE UNDER 37 CFR 1.8: The undersigned hereby certifies that this Transmittal Letter and the paper, as described hereinabove, are being deposited in the United States Postal Service, as first class mail, with sufficient postage, in an envelope addressed to: Box PCT, Assistant Commissioner for Patents, Washington, D.C. 20231, on September 18, 1998.

By:   
Douglas P. Mueller

Box PCT  
Assistant Commissioner for Patents  
Washington, D.C. 20231

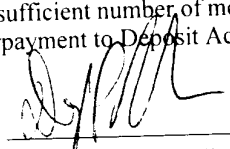
Sir:

We are transmitting herewith the attached:

- ☐ Transmittal Sheet in duplicate containing Certificate of Mailing
- ☐ Verified statement to establish small entity status
- ☐ Other: Refund Request
- ☐ Return postcard

Please consider this a PETITION FOR EXTENSION OF TIME for a sufficient number of months to enter these papers, if appropriate. Please charge any additional fees or credit overpayment to Deposit Account No. 13-2725. A duplicate of this sheet is enclosed.

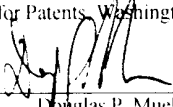
MERCHANT, GOULD, SMITH, EDELL,  
WELTER & SCHMIDT  
3100 Norwest Center, Minneapolis, MN 55402  
(612) 332-5300

By:   
Name: Douglas P. Mueller  
Reg. No.: 30,300  
DPM/sef

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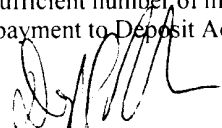
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DPM/sef

# **SMALL BUSINESS**

## **VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS (37 C.F.R. 1.9(f) AND 1.27(c)) - SMALL BUSINESS CONCERN**

I hereby declare that I am

- a) ☐ the owner of the small business concern identified below:  
b) ☐ an official of the small business concern empowered to act on behalf of the concern identified below:

NAME OF CONCERN: Oxford BioMedica (UK) Limited  
ADDRESS OF CONCERN: Medawar Centre, Robert Robinson Avenue  
Oxford Science Park  
Pxford, OX4 4GA United Kingdom

I hereby declare that the above identified small business concern qualifies as a small business concern as defined in 13 C.F.R. 121.801-805, and reproduced in 37 C.F.R. 1.9(d), for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.

I hereby declare that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the invention, entitled RETROVIRAL VECTOR AND ITS USE IN GENE THERAPY by inventor(s) Alan John KINGMAN; Susan Mary KINGSMAN described in

- a) ☐ the specification filed herewith.  
b) ☐ provisional application serial no. \_\_\_\_\_, filed \_\_\_\_\_.  
c) ☒ non-provisional application serial no. PCT/GB97/00210, filed Intl Filing Date January 23, 1997.  
d) ☐ patent no. \_\_\_\_\_, issued \_\_\_\_\_.

If the rights held by the above-identified small business concern are not exclusive, each individual, concern or organization having rights to the invention is listed below\* and no rights to the invention are held by any person, other than the inventor, who could not qualify as an independent inventor under 37 C.F.R. 1.9(c) or by any concern which would not qualify as a small business concern under 37 C.F.R. 1.9(d) or a nonprofit organization under 37 C.F.R. 1.9(e). \*NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 C.F.R. 1.27)

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
a) ☐ INDIVIDUAL b) ☐ SMALL BUSINESS CONCERN c) ☐ NONPROFIT ORGANIZATION

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
a) ☐ INDIVIDUAL b) ☐ SMALL BUSINESS CONCERN c) ☐ NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 C.F.R. 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereof, or any patent to which this verified statement is directed.

NAME: PETER JOHN NOLAN  
TITLE: DIRECTOR OF OPERATIONS  
ADDRESS: MEDAWAR CENTRE, OXFORD SCIENCE PARK, OXFORD OX4 4GA  
SIGNATURE: [Signature] Date: 18 Sept 1998